

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>my</i>		6/5/11
O.I.P.E. CLASSIFIER		2	6/16/11
FORMALITY REVIEW	<i>Cartale</i>	5C-826	5-7-12/11
RESPONSE FORMALITY REVIEW	A-11	5C 580	11-14-10

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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